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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

	Application Number	10/823,377	
	Filing Date	April 12, 2004	
	First Named Inventor	Robert D. Groneberg et al	
	Art Unit	1625	
	Examiner Name	Margaret M. Seaman	
Total Number of Pages in This Submission		Attorney Docket Number	03-086-A

ENCLOSURES (Check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Return Receipt Postcard		
<table border="1"><tr><td>Remarks</td></tr><tr><td>Applicants believe no fee is due with this Supplemental Response. In the event a fee is due, the Commissioner is authorized to charge our Deposit Account No. 13-2490.</td></tr></table>			Remarks	Applicants believe no fee is due with this Supplemental Response. In the event a fee is due, the Commissioner is authorized to charge our Deposit Account No. 13-2490.
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	McDonnell Boehnen Hulbert & Berghoff LLP		
Signature			
Printed name	Stephen H. Docter		
Date	April 8, 2008	Reg. No.	44,659

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Stephen H. Docter	Date	April 8, 2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
(Case No. 03-086-A)**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**SUPPLEMENTAL RESPONSE TO THE OFFICE ACTION  
MAILED DECEMBER 20, 2007**

Sir:

Responsive to the Office Action Mailed December 20, 2007, Applicants respectfully request the Examiner to reconsider the patent application identified above in view of the following amendment and remarks. As the Response filed on February 20, 2008 is a complete response, Applicants believe no fee is due with this Supplemental Response. In the event a fee is due, the Commissioner is authorized to charge our Deposit Account No. 13-2490.

**Amendments** to the claims are reflected in the Listing of the Claims, beginning on page 2 of this paper.

**Remarks/Arguments** begin on page 11 of this paper.